

REMARKS

Claims 17 and 20 have been rejected under 35 U.S.C. § 103(a) as being unpatentable over Yeung et al WO '159 in view of Obenchain '962. This rejection is respectfully traversed.

Independent claim 17 specifically recites, inter alia, “a support channel for a cardiac lead that is disposed on the suction attachment and that includes coaxial mating segments that are relatively rotatable about a coaxial axis thereof, each segment having a longitudinal slot extending between distal and proximal ends thereof for selective configuration” ... “as a channel open longitudinally between proximal and distal ends thereof in another relative rotational orientation for releasing a cardiac lead laterally therefrom.”

In addition, dependent claim 29 is further limited by recitation of “the cannula supports an endoscope therein for providing visualization of the suction attachment contacting an exterior target site on the heart.” Significantly, these aspects of the claimed invention facilitate laterally releasing a confined electrode lead over the entire length from proximal to distal ends of the support channel. This enables an electrode lead to remain placed and attached at a target site on an organ (e.g., the heart of a patient) while the apparatus for placement of the lead is removed laterally away from the lead, without having to retrace back along the lead.

These aspects of the claimed invention are not disclosed by the cited references considered either alone or in the combination proposed by the Examiner. Fundamentally, the disclosure of Yeung et al WO '159 does not support the Examiner's analyses of a slot extending *between the distal end and a proximal end* of a cylindrical channel 16. The disclosure (e.g., at page 8, lines 11-19, and elsewhere) cannot support such analyses because the inner 'cartridge' of clips (that may have a full-length lateral slot) would undesirably release its confined resilient clips all along the length of the cylindrical channel 16, if such channel included a full-length slot between distal and proximal ends thereof, as the Examiner contends.

Quite to the contrary, this reference at best merely includes a short-length slot 2 only near or down from the distal end of the cylindrical channel 16 sufficiently long to release only one resilient clip in response to the described "in-phase" alignment of the slots 2, 8. Clearly, then, the Examiner's analyses of this reference extrapolates well beyond its disclosure to yield an impermissible alteration of the function or operational purpose of the disclosed apparatus. This is because all confined resilient clips within a slotted cartridge would be impermissibly released simultaneously through (an Examiner's extrapolation) full-length slot in the cylindrical channel upon in-phase alignment of such supposed channel slot and cartridge slot.

And, Obenchain '962 is noted to incorporate channels 14, 16 variously for housing an endoscope and laser emitter, respectively, and fluid conduits for irrigating and suctioning a surgical site, but none of these channels or conduits are noted to be openable laterally along aligned full-length slots in any manner resembling Applicants' claimed invention. Thus, merely combining these references as proposed by the Examiner fails to 'cure' the deficient disclosure of Yeung et al WO '159, and also fails to establish even a *prima facie* basis, including *all* recited elements, from which a proper determination of obviousness may be formed. It is therefore respectfully submitted that claims 17 and 29 are patentably distinguishable over the cited references.

Claim 18 has been rejected under 35 U.S.C. § 103(a) as being unpatentable over Yeung et al WO '159 and Obenchain '962 in view of Starksen '161. This rejection is respectfully traversed.

Dependent claim 18 incorporates the recitation of "a support channel for a cardiac lead that is disposed on the suction attachment and that includes coaxial mating segments that are relatively rotatable about a coaxial axis thereof, each segment having a longitudinal slot extending between distal and proximal ends thereof for selective configuration" ... "as a channel open longitudinally between proximal and distal ends thereof in another relative rotational orientation for releasing a cardiac lead laterally therefrom", and is further limited by the specific

recitation of “a cardiac lead connected to an electrode disposed near a surface of the suction attachment to contact the heart externally, the cardiac lead extending along the support channel in the closed configuration to the proximal end thereof for connecting the electrode to a utilization circuit and being releasable laterally from the support channel through the longitudinal slot formed therein in the open configuration”.

These aspects of the claimed invention are not disclosed or even suggested by the references considered either alone or in the combination proposed by the Examiner. The deficient disclosure of Yeung et al WO '159 and Obenchain '962 is discussed in the above Remarks, and Starksen '161 is noted to disclose an intraluminal steerable catheter for penetrating into a heart chamber. A suction attachment, as claimed by Applicants, would appear to be highly inappropriate for intra-chamber placement of an electrode via intraluminal placement. At best, this reference is noted to rely upon a steerable cannula for intraluminal penetration into a heart chamber, where the cannula has only a splittable sidewall and no relatively rotatable coaxial segments, as claimed by Applicants, for selectively configuring a longitudinal sidewall opening. And, any suction attachment on the cannula suitable for contacting an exterior target site on the heart, in any manner resembling Applicants' claimed invention, would undesirably operate to vacuum blood from within the heart or the vessel by which the structure accesses an inner

chamber of the heart. Thus, combining these references as proposed by the Examiner, if even functionally possible, would impermissibly and materially alter the purpose and operation of the references, and would nevertheless fail to establish even a *prima facie* basis, including *all* recited elements, from which a proper determination of obviousness could be formed. It is therefore respectfully submitted that dependent claim 18 is patentably distinguishable over the cited references.

Reconsideration and favorable action are solicited.

Respectfully submitted,
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